

Health At All Intersections: Centering Anti-Oppression in Public Health



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Why This Topic?

1. Important basics for ending suffering, important to refresh & keep on top.
2. Political moment – Black and poor communities are demanding justice & resources for survival and safety – Public Health is implicated in this moment.
3. Public Health is expanding as a field – need is higher and more unique, starting to include communities that have traditionally been excluded, including trans women, sex workers, and formerly incarcerated.



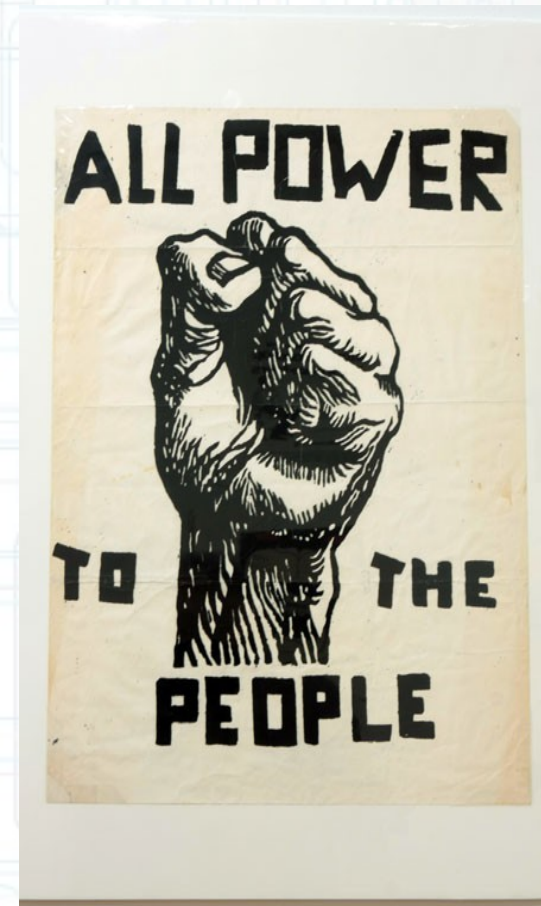
The Building Blocks

Storytelling:

- ...as a key advocacy tool.
- ...as an organizing and media strategy/tool.
- ...as a tool for healing and empowerment.

Common Language:

- *Get comfortable with the language of oppression.
- *Embrace intersectionality, move away from us/them narratives.



What do you mean when you say...

POWER: at its root, power is the capacity to control circumstances. (via SOUL)

PRIVILEGE: ease of access to benefits and resources (economic, social, political, etc) that others do not have as a result of one's group membership.



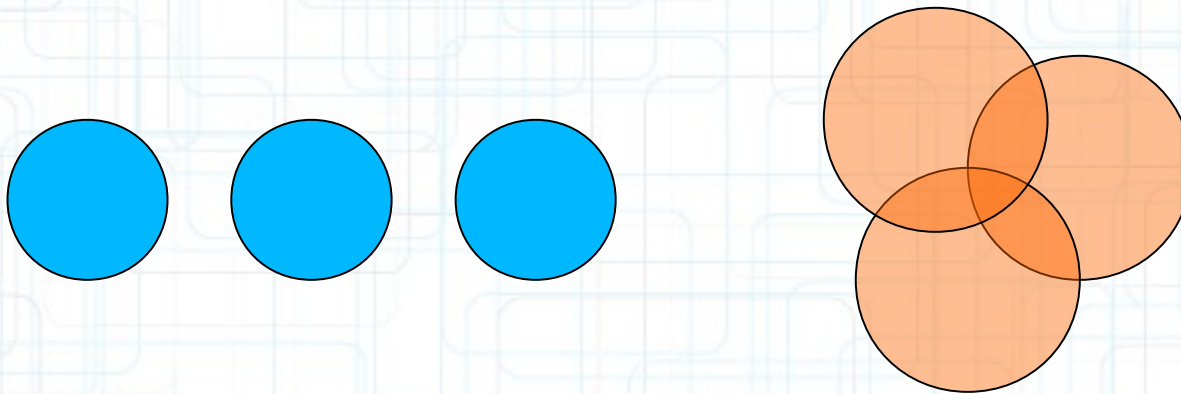
What do you mean when you say...

OPPRESSION: mistreatment and denial of access to power and resources of people based upon their identity/ies. Manifests in a layered, rippled effect:



What do you mean when you say...

INTERSECTIONALITY: The ways that our multiple identities (such as gender, race, class, ability, sexual orientation, and other identifying factors) are simultaneously informing how we are treated/perceived in the world as well as how we treat/perceive others.

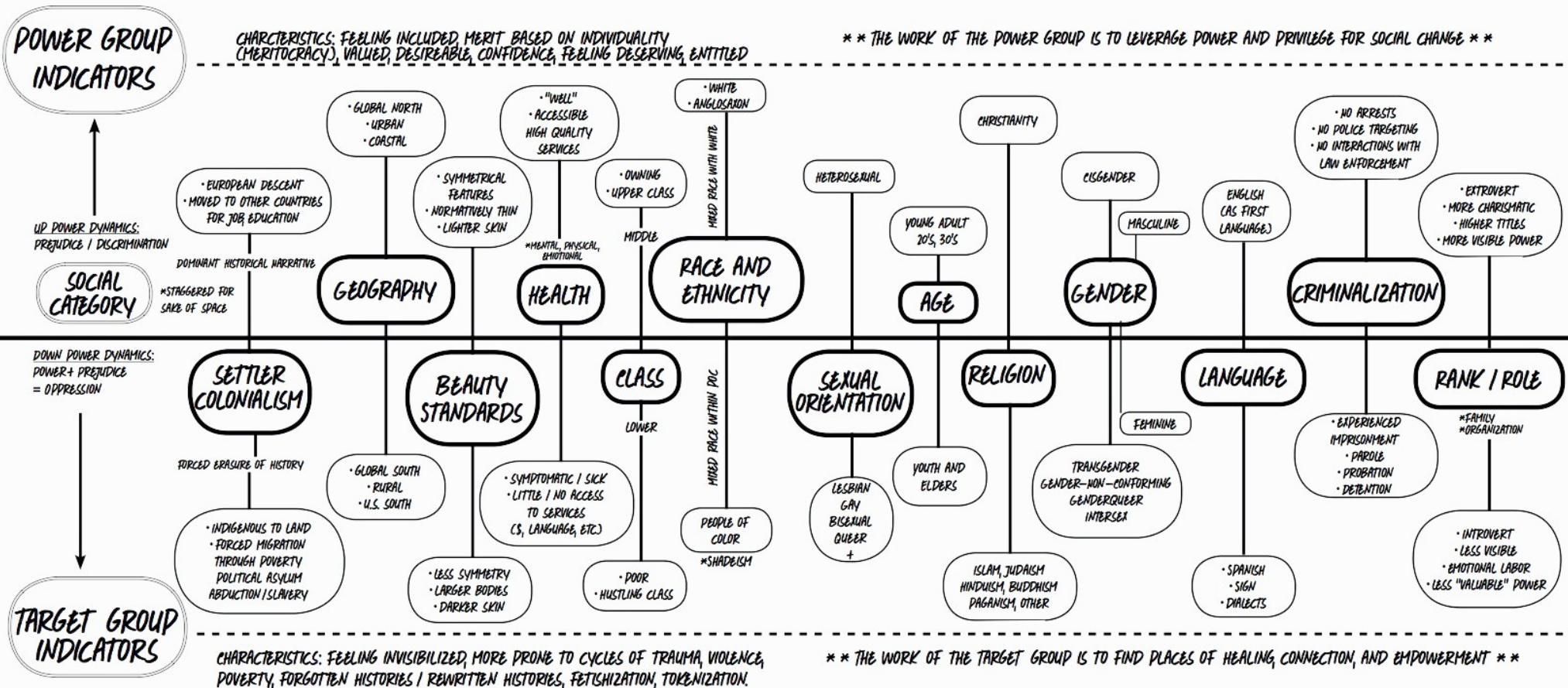


What do you mean when you say...

ALLY: actions based on exposing social, personal, and moral costs of maintaining privilege and subsequently changing the systems by which one might benefit and dismantling systemic oppression.



Spectrum of Intersectionality



Debrief/Self-Evaluation

1. Where are places where you hold power?
Experience targeting?
2. How do these experiences influence your work in Public Health?
3. How do these experiences influence how you interact with clients? Co-workers? Colleagues?
4. What are ways you see this spectrum impacting Public Health, including access to care and/or employment in the field?

Sembramos
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REVOLUCIÓN



Centering Public Health

How is “health” defined? Who is defining it?

Are basic needs (food, housing, bathrooms) a part of the Public Health framework? What about spiritual, cultural, and natur(e)al?

How is violence (intimate, self, state) integrated into notions of Public Health?

What are the opportunities/challenges of Public Health “professionalizing” while majority of those receiving services as POC, working class & poor?



Program + Policy Eval Questions

- 1) WHO will be impacted by this project?*
- 2) WHAT are the unintended consequences?*
- 3) In WHICH ways does this project reflect or counter anti-oppression values?*
- 4) HOW can you intervene on potential harm?*

Scenario: Funding requirement change, there are needs for prioritizing local residents due to budget shortfalls - proof of residence is now required for all county public health services.

Who: positive for local residents, also impacts homeless, undocumented, and trans people, folks with major barriers (incl mental health)

What: creates fear, exposure to ICE/deportation threat, most vulnerable/in crisis families will not seek support, impossible for homeless/street-based

Which: supports – local families will get much needed support, counters – excludes others who are also in deep need (promotes scarcity and myths that there isn't enough // increases levels of mistrust amongst poor communities)

How: organize against it, administrative plan/protocol for undocumented families, support services and case management available to low functioning folks to help navigate.

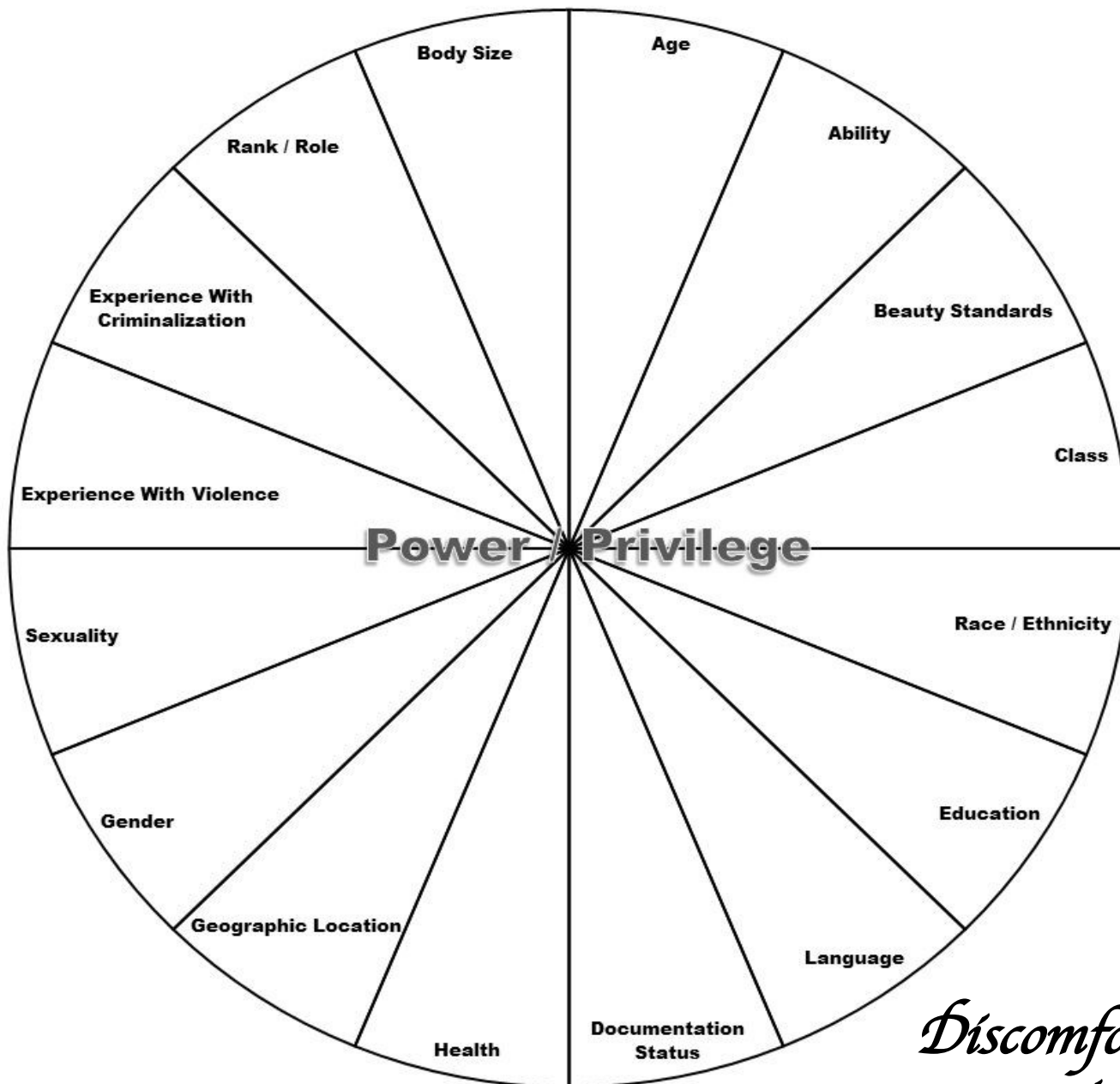


Service Provision/ Direct Services

***Anti-Oppression Frameworks that intersect with
Public Health Provision:***

- 1. Harm Reduction**
- 2. Trauma Informed Approaches**
- 3. Verbal De-escalation and Restorative Justice**
- 4. Basic Needs Centered models (i.e. Housing First)**
- 5. Transformative Justice and Restorative Practices**

Self Work & Self Love



1. Know Yourself

2. Do Your Own Healing

3. Commit To The Long Haul

4. Lead By Listening

Discomfort is a part of unlearning oppression.